

TOWN OF SAUGUS

SAUGUS RETIREMENT BOARD 25R MAIN STREET TOWN HALL ANNEX SAUGUS, MASSACHUSETTS 01906

Telephone: (781) 231-7656 Fax: (781) 231-4067 Email: aquinlan@saugus-ma.gov

CHANGE OF ADDRESS FORM

Please advise the Saugus Retirement Board as soon as possible for any change in your mailing address (whether the change is permanent or temporary). We cannot accept address changes over the telephone. You should mail or fax this information as soon as possible. Even if you are retired on direct deposit, other documents are sent which cannot be forwarded. (1099R, statements etc.)

If you have a temporary residence for a few months each year, i.e. winter in Florida, please provide us with the dates you will be at each address.

Name	Social Security Number			
	(Please Print)	•		
Old Address _				
	(Number and Street – and/or P.O. Box)			
	(City/Town)	(State)	(Zip Code)	
	(Area Code and Phone Nu	mber)		
New Address		/ D.O. D)		
	(Number and Street – and/or P.O. Box)			
	(City/Town)	(State)	(Zip Code)	
	(Area Code and Phone Nu	mber)		
Please record n	ny new address as: (Check One)			
Permanent Change		Temporary Change		
I wish to receive mail at this address		I wish to receive	I wish to receive mail at this address	
Beginning on/		Beginning on	/	
And continue until further notice.		And continue un	And continue until further notice.	
Recipient's Signature		Date		

A Power of Attorney, Guardian or Conservator may sign this form as long as a copy of the legal document is on file with the Saugus Retirement Board.